Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF OHIO		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Francis First name A. Middle name Szarnicki Last name and Suffix (Sr., Jr., II, III)	Beverly First name J. Middle name Szarnicki Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Francis Adam Szarnicki Frank A. Szarnicki Francis Szarnicki	Beverly Jean Szarnicki Beverly Szarnicki
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1674	xxx-xx-9924

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):				
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	■ I have not used any business name or EINs. Business name(s) EINs				
5.	Where you live	12383 Bayvista Cir NW Uniontown, OH 44685	If Debtor 2 lives at a different address:				
		Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code				
	<u>Stark</u> County		County				
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.				
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code				
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)				

Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if known) Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ■ No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this bankruptcy petition.

	otor 1 Francis A. Szarnic Beverly J. Szarnic			Case number (if known)		
Par	t 3: Report About Any Bu	ısinesses	You Own as a Sole Proprie	etor		
12.	12. Are you a sole proprietor of any full- or part-time ■ No. Go to Part 4. business?					
		☐ Yes.	Name and location of bu	usiness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if any	y		
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, Sta	ate & ZIP Code		
	it to this petition.		Check the appropriate b	ox to describe your business:		
			☐ Health Care Bus	iness (as defined in 11 U.S.C. § 101(27A))		
			☐ Single Asset Rea	al Estate (as defined in 11 U.S.C. § 101(51B))		
			☐ Stockbroker (as	defined in 11 U.S.C. § 101(53A))		
			☐ Commodity Brok	ser (as defined in 11 U.S.C. § 101(6))		
			☐ None of the above	ve		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. 1116(1)(B).				
	For a definition of small	■ No.	I am not filing under Cha	apter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapte Code.	r 11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
		☐ Yes.	I am filing under Chapte	r 11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have Any	/ Hazardous Property or A	ny Property That Needs Immediate Attention		
14.	Do you own or have any property that poses or is	■ No.				
	alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?			
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?			
				Number, Street, City, State & Zip Code		

Debtor 1 Francis A. Szarnicki
Debtor 2 Beverly J. Szarnicki

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 Francis A. Szarn otor 2 Beverly J. Szarn			Case num	bber (if known)
Par	t 6: Answer These Ques	stions for I	Reporting Purposes		
	What kind of debts do you have?	16a.	Are your debts primarily of	consumer debts? Consumer debts are d rsonal, family, or household purpose."	efined in 11 U.S.C. § 101(8) as "incurred by an
	•		☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are deb	ots that you incurred to obtain
			•	vestment or through the operation of the b	usiness or investment.
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busir	ness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	■ Yes.		Do you estimate that after any exempt pravailable to distribute to unsecured credito	operty is excluded and administrative expense rs?
	administrative expenses are paid that funds will		■ No		
	be available for distribution to unsecure creditors?	d	☐ Yes		
18.	How many Creditors do	■ 1-49		1 ,000-5,000	□ 25,001-50,000
	you estimate that you owe?	□ 50-9		☐ 5001-10,000	<u> </u>
		□ 100- □ 200-		□ 10,001-25,000	☐ More than100,000
19.	How much do you	□ \$0 -	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your assets to be worth?	□ \$50,	001 - \$100,000	□ \$10,000,001 - \$50 million	☐ \$1,000,000,001 - \$10 billion
			0,001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		₩ \$500),001 - \$1 million	4 100,000,001 - \$500 million	iniore than \$50 billion
20.	How much do you	□ \$0 -	\$50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		,001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
		_ *	0,001 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion
		□ \$500	0,001 - \$1 million	— \$100,000,001 - \$300 Hillion	□ Wore than \$50 billion
Par	t 7: Sign Below				
For	you	I have e	xamined this petition, and I de	eclare under penalty of perjury that the info	ormation provided is true and correct.
				7, I am aware that I may proceed, if eligib relief available under each chapter, and I	le, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
				I not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b).	not an attorney to help me fill out this
		I reques	st relief in accordance with the	chapter of title 11, United States Code, s	pecified in this petition.
			otcy case can result in fines up		y or property by fraud in connection with a 0 years, or both. 18 U.S.C. §§ 152, 1341, 1519
		/s/ Fra	ncis A. Szarnicki	/s/ Beverly J.	
			s A. Szarnicki re of Debtor 1	Beverly J. Sza Signature of Deb	
		Execute		Executed on _	
			MM / DD / YYYY		MM / DD / YYYY

Debtor 1 Francis A. Szarnicki
Debtor 2 Beverly J. Szarnicki

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Rebecca J. Sremack	Date	July 23, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Rebecca J. Sremack 0092313		
Printed name		
Sremack Law Firm LLC		
Firm name		
2745 South Arlington Road		
Akron, OH 44312		
Number, Street, City, State & ZIP Code		
Contact phone (330) 644-0061	Email address	info@sremacklaw.com
0092313 OH		
Bar number & State		

				9/05/18 4:35PM
	in thi	is information to identify your case:		
Deb	tor 1	Francis A. Szarnicki		
Dob	.tor 0	First Name Middle Name Last Name		
1	otor 2 use if, f	Beverly J. Szarnicki iling) First Name Middle Name Last Name		
Unit	ed St	tates Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO		
(if kn	e nur	mber	_	eck if this is an ended filing
				· ·
~ (,	15		
		al Form 106Sum		
		ary of Your Assets and Liabilities and Certain Statistical Information		12/15
info	rmati	mplete and accurate as possible. If two married people are filing together, both are equally responsible f on. Fill out all of your schedules first; then complete the information on this form. If you are filing ameno inal forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	t 1:	Summarize Your Assets		
				assets e of what you own
1.	Sch	edule A/B: Property (Official Form 106A/B)		
••	1a.	Copy line 55, Total real estate, from Schedule A/B	\$_	220,300.00
	1b.	Copy line 62, Total personal property, from Schedule A/B	\$_	197,132.00
	1c.	Copy line 63, Total of all property on Schedule A/B	\$_	417,432.00
Par	t 2:	Summarize Your Liabilities		
			You	· liabilities
				unt you owe
2.		edule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	201,220.00
3.		edule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$	0.00
		Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	· –	
	30.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	74,057.00
		Your total liabilities	¢	275,277.00
		Tour total liabilities	φ	2/5,2//.00
Par	t 3:	Summarize Your Income and Expenses		
1	Soh	edule I: Your Income (Official Form 106I)		
4.		by your combined monthly income from line 12 of Schedule I	\$_	3,592.78
5.		edule J: Your Expenses (Official Form 106J) by your monthly expenses from line 22c of Schedule J	\$	4,004.14
Par		Answer These Questions for Administrative and Statistical Records	_	,
ı aı	ч.	Answer These Questions for Administrative and Statistical Necolds		
6.	Are □	you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other s	schedules.
7.	■ Wha	Yes at kind of debt do you have?		
		Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a person	al, family, or
	_	household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.		Laurence to the traffic A
		Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s <i>box</i> and	submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

899.76

\$

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

									9/05/18 4:35P
Fill	in this inform	nation to identif	y your case and th	nis filin	g:				
Deb	otor 1	Francis A.	Szarnicki						
		First Name		Name	Last Name				
Deb	otor 2	Beverly J. S	Szarnicki						
(Spo	use, if filing)	First Name	Middle	Name	Last Name				
Unit	ted States Bar	nkruptcy Court fo	r the: NORTHER	N DIST	RICT OF OHIO				
Cas	e number								Check if this is an
									amended filing
Off	ficial For	rm 106A/E	3						
Sc	hedule	e A/B: P	roperty						12/15
think infor	it fits best. Be	as complete and space is needed	accurate as possibl	e. If two	t only once. If an asset fits in more than one married people are filing together, both are on his form. On the top of any additional pages,	equally resp	onsible for su	pplyi	ng correct
Part	1: Describe E	Each Residence, E	Building, Land, or Ot	her Real	I Estate You Own or Have an Interest In				
1. D e	you own or h	ave any legal or e	quitable interest in a	ny resid	dence, building, land, or similar property?				
Г	No. Go to Part	2							
	Yes. Where is								
	ries. Where is	the property:							
1.1				What	t is the property? Check all that apply				
	12383 Bay	vista Cir NW		П	Single-family home	Do not ded	uct secured cla	aims c	or exemptions. Put
	Street address, if	f available, or other de	escription	_	Duplex or multi-unit building	the amount of any secured claims on Sched Creditors Who Have Claims Secured by Pro			
				_	O	Creditors who Have Claims Sec		сигеа ву Ргорепу.	
				_					
	United to the same		44005 0000			Current va			rrent value of the
	Uniontown		44685-0000			entire prop	•	po	rtion you own?
	City	State	ZIP Code			\$22	20,000.00		\$220,000.00
									wnership interest
				_			ee simple, ten: e), if known.	ancy	by the entireties, or
				wno	has an interest in the property? Check one Debtor 1 only	a me estat	c), ii kiiowii.		
	Stark								
	County			_	Debtor 1 and Debtor 2 only				
	200,			_	•		t if this is com	muni	ity property
					The reaction of the debtero and another	`	,		
					er information you wish to add about this item erty identification number:	i, such as lo	Cai		
				hioh	e, .aerianounon nambot.				

Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if known) If you own or have more than one, list here: 1.2 What is the property? Check all that apply ☐ Single-family home Do not deduct secured claims or exemptions. Put Street address, if available, or other description the amount of any secured claims on Schedule D: Duplex or multi-unit building Creditors Who Have Claims Secured by Property. Condominium or cooperative Manufactured or mobile home Current value of the Current value of the Land entire property? portion you own? City State ZIP Code Investment property \$300.00 \$300.00 ☐ Timeshare Describe the nature of your ownership interest ☐ Other (such as fee simple, tenancy by the entireties, or a life estate), if known. Who has an interest in the property? Check one ☐ Debtor 1 only Debtor 2 only County Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 1/3 interest in unbuildable land - swamp property in Florida; no road access. Offered \$300 for the entire property recently. 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for \$220,300.00 pages you have attached for Part 1. Write that number here.......>> Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Chrysler Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: 300 M Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 50000 entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another **Good condition** \$13,205.00 \$13,205.00 ☐ Check if this is community property (see instructions) Do not deduct secured claims or exemptions. Put Chevrolet 32 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: **Equinox** Model: Creditors Who Have Claims Secured by Property. Debtor 1 only 2010 Year: Debtor 2 only Current value of the Current value of the 99500 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: ☐ At least one of the debtors and another \$6,888.00 \$6,888.00 ☐ Check if this is community property (see instructions)

Debtor 2	Beverly J. Szarnicki	Case number (if known)
		creational vehicles, other vehicles, and accessories shing vessels, snowmobiles, motorcycle accessories	
■ No			
☐ Yes			
		f your entries from Part 2, including any entries for per here=>	\$20,093.00
Part 3: Des	scribe Your Personal and Household Items		
-	vn or have any legal or equitable interest in a	ny of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Example ☐ No	old goods and furnishings les: Major appliances, furniture, linens, china, kito	chenware	
Yes.	Describe		
	Miscellaneous househol	ld goods	\$1,500.00
■ No □ Yes.		and digital equipment; computers, printers, scanners; musicers, games	collections; electronic devices
Example No		other artwork; books, pictures, or other art objects; stamp, coi	n, or baseball card collections;
Example 	ent for sports and hobbies es: Sports, photographic, exercise, and other ho musical instruments	obby equipment; bicycles, pool tables, golf clubs, skis; canoes	s and kayaks; carpentry tools;
■ No □ Yes.	Describe		
■ No	ns oles: Pistols, rifles, shotguns, ammunition, and re Describe	elated equipment	
□ No ´	s bles: Everyday clothes, furs, leather coats, desig Describe	ner wear, shoes, accessories	
	Miscellaneous wearing a	apparel	\$500.00
12. Jewelr Examp		ement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
■ No □ Yes.	Describe		
-	rm animals oles: Dogs, cats, birds, horses		
■ No	-		

Official Form 106A/B

Debtor 1 Debtor 2	Beverly J. Szarnick		Case number (if know	m)
_ `	ther personal and house	ehold items you did	not already list, including any health aids you did not list	
■ No □ Yes.	. Give specific information	1		
			art 3, including any entries for pages you have attached	\$2,000.00
Part 4: De	escribe Your Financial Asse	ets		
	wn or have any legal or o		any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	nples: Money you have in y		me, in a safe deposit box, and on hand when you file your pe	tition
			Cash	\$25.00
□ No ■ Yes.		Checking accou	unt, JP Morgan Chase Bank	\$2.00
	17.1.	Wife's name	JP Worgan Chase Bank	\$2.00
	17.2.	Checking accou jointly held	unt - JP Morgan Chase	\$6.00
	17.3.	Checking	JP Morgan Chase	\$6.00
	s, mutual funds, or publi aples: Bond funds, investm		skerage firms, money market accounts	
■ No □ Yes		Institution or issuer i	name:	
19. Non-p joint v ■ No	oublicly traded stock and venture . Give specific information		orated and unincorporated businesses, including an inter % of ownership:	est in an LLC, partnership, and
Nego: Non-r ■ No	tiable instruments include negotiable instruments are . Give specific information	personal checks, cas those you cannot tra	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders. nsfer to someone by signing or delivering them.	
<i>Exam</i> □ No	ement or pension account apples: Interests in IRA, ERI . List each account separa	nts ISA, Keogh, 401(k), 4	03(b), thrift savings accounts, or other pension or profit-sharing lostitution name:	ng plans

Debtor Debtor		A. Szarnicki J. Szarnicki	Case number (if	known)
		OPERS		\$125,000.00
		OPERS		\$50,000.00
Yo	ur share of all เ	s and prepayments unused deposits you have made so that you may co ments with landlords, prepaid rent, public utilities (ele		companies, or others
■ N □ Y	lo 'es	Institution	name or individual:	
23. Anr	,	ract for a periodic payment of money to you, either for	or life or for a number of years)	
	es	Issuer name and description.		
	J.S.C. §§ 530(b	ucation IRA, in an account in a qualified ABLE property (1), 529A(b), and 529(b)(1).	rogram, or under a qualified state tuit	tion program.
	es	Institution name and description. Separately file	the records of any interests.11 U.S.C. §	521(c):
■ N	lo	or future interests in property (other than anythi	ng listed in line 1), and rights or pow	ers exercisable for your benefit
	amples: Interne	nts, trademarks, trade secrets, and other intellect et domain names, websites, proceeds from royalties		
	-	fic information about them		
	amples: Buildin	ses, and other general intangibles g permits, exclusive licenses, cooperative association	on holdings, liquor licenses, professiona	al licenses
	-	fic information about them		
Money	or property o	wed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
_	refunds owe	d to you		
■ N □ Y	-	ic information about them, including whether you alr	eady filed the returns and the tax years.	
Ex	•	ue or lump sum alimony, spousal support, child supp	port, maintenance, divorce settlement, p	property settlement
■ N □ Y		ic information		
Ex	<i>amples:</i> Unpaid benefi	omeone owes you d wages, disability insurance payments, disability be ts; unpaid loans you made to someone else	enefits, sick pay, vacation pay, workers'	compensation, Social Security
■ N □ Y		fic information		
		ance policies , disability, or life insurance; health savings account	(HSA); credit, homeowner's, or renter's	insurance
• •		nsurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:

			9/05/18 4:35PN
Debtor 1 Debtor 2	Francis A. Szarnicki Beverly J. Szarnicki	Case number (if known)	
Debioi 2	Beverly J. Szarnicki	Case Humber (# known)	
If you a someo	rerest in property that is due you from someone who have the beneficiary of a living trust, expect proceeds from a ne has died. Give specific information		eive property because
	against third parties, whether or not you have filed a ples: Accidents, employment disputes, insurance claims, o		
☐ Yes.	Describe each claim		
■ No	contingent and unliquidated claims of every nature, in	cluding counterclaims of the debtor and rights to	o set off claims
■ No	ancial assets you did not already list Give specific information		
36. Add t	he dollar value of all of your entries from Part 4, includent 4. Write that number here		\$175,039.00
Part 5: Des	scribe Any Business-Related Property You Own or Have an In	terest In. List any real estate in Part 1.	
37. Do you o	own or have any legal or equitable interest in any business-re	lated property?	
■ No. Go			
☐ Yes. G	io to line 38.		
	scribe Any Farm- and Commercial Fishing-Related Property Y ou own or have an interest in farmland, list it in Part 1.	ou Own or Have an Interest In.	
	own or have any legal or equitable interest in any far	m- or commercial fishing-related property?	
No.	Go to Part 7.		
☐ Yes.	Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That	You Did Not List Above	
Examp	have other property of any kind you did not already li les: Season tickets, country club membership	st?	
■ No □ Yes.	Give specific information		
54. Add t	he dollar value of all of your entries from Part 7. Write	that number here	\$0.00

Debtor 1 Francis A. Szarnicki
Debtor 2 Beverly J. Szarnicki

Case number (if known)

	2010119 01 02411110111			
Part	List the Totals of Each Part of this Form			
55.	Part 1: Total real estate, line 2			\$220,300.00
56.	Part 2: Total vehicles, line 5	\$20,093.00		
57.	Part 3: Total personal and household items, line 15	\$2,000.00		
58.	Part 4: Total financial assets, line 36	\$175,039.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$197,132.00	Copy personal property total	\$197,132.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$417,432.00

Fill in this information to identify your case:								
Debtor 1	Francis A. Szarni	cki						
	First Name	Middle Name	Last Name					
Debtor 2	Beverly J. Szarnic	cki						
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT	ОГ ОНЮ					
Case number								
(if known)				☐ Check if th amended f				
				amended f	iling			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exempt	ions are you claiming	Check one only,	even if you	r spouse is filing	with you.

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
12383 Bayvista Cir NW Uniontown, OH 44685 Stark County	\$220,000.00	-	\$273,850.00	Ohio Rev. Code Ann. § 2329.66(A)(1)	
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	, , , , , , , , , , , , , , , , , , ,	
1/3 interest in unbuildable land - swamp property in Florida; no road	\$300.00		\$2,500.00	Ohio Rev. Code Ann. § 2329.66(A)(18)	
access. Offered \$300 for the entire property recently. Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit		
Miscellaneous household goods Line from Schedule A/B: 6.1	\$1,500.00		\$2,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
Ellie II olii oonedale 772. G.1			100% of fair market value, up to any applicable statutory limit	2020100(1-1)(4-1)(4)	
Miscellaneous wearing apparel Line from Schedule A/B: 11.1	\$500.00		\$1,500.00	Ohio Rev. Code Ann. §	
Ellie II oli Tochedale 74 B. TTT			100% of fair market value, up to any applicable statutory limit	2329.66(A)(4)(a)	
Cash	\$25.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
Line from Schedule A/B: 16.1				2020.00(A)(U)	

Francis A. Szarnicki Debtor 1 Beverly J. Szarnicki Case number (if known) Debtor 2 Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Checking account, Wife's name: JP Ohio Rev. Code Ann. § \$2.00 \$50.00 Morgan Chase Bank 2329.66(A)(3) 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit Checking account - jointly held: JP Ohio Rev. Code Ann. § \$6.00 \$50.00 Morgan Chase 2329.66(A)(3) Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Checking: JP Morgan Chase** Ohio Rev. Code Ann. § \$50.00 \$6.00 Line from Schedule A/B: 17.3 2329.66(A)(3) 100% of fair market value, up to any applicable statutory limit **OPERS** Ohio Rev. Code Ann. § \$175,000.00 \$125,000.00 2329.66(A)(10)(c) Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit **OPERS** Ohio Rev. Code Ann. § \$75,000.00 \$50,000.00 2329.66(A)(10)(c) Line from Schedule A/B: 21.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

Fill in this information to identify	our case:			
Debtor 1 Francis A. Sz				
First Name	Middle Name Last Name		-	
Debtor 2 Beverly J. Sz			-	
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for	he: NORTHERN DISTRICT OF OHIO		-	
Case number				
(if known)			☐ Check	if this is an
			ameno	led filing
Official Form 100D				
Official Form 106D				
Schedule D: Credito	rs Who Have Claims Secured	by Propert	у	12/15
	le. If two married people are filing together, both are eq I it out, number the entries, and attach it to this form. Or			
1. Do any creditors have claims secure	d by your property?			
☐ No. Check this box and subm	nit this form to the court with your other schedules. Yo	ou have nothing else t	o report on this form.	
Yes. Fill in all of the informati	on below.			
Part 1: List All Secured Claims				
	as more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor	has a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alpha	betical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Ally Financial	Describe the property that secures the claim:	\$10,245.00	\$6,888.00	\$3,357.00
Creditor's Name	2010 Chevrolet Equinox 99500 miles			
PO Box 380901				
Minneapolis, MN	As of the date you file, the claim is: Check all that apply.			
55438-0901	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		eurea		
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	_ ```			
☐ Check if this claim relates to a	☐ Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number			
2.2 Live Well Financial	Describe the property that secures the claim:	\$165,000.00	\$220,000.00	\$0.00
Creditor's Name	12383 Bayvista Cir NW Uniontown,	<u> </u>		
	OH 44685 Stark County			
1011 Boulder Springs Dr.	As of the date you file, the claim is: Check all that			
Suite 420 Richmond, VA 23225	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	lacksquare An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	g			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
-				
Date debt was incurred	Last 4 digits of account number			

Debtor 1	1 Francis A. Szarnicki			Case number (if know)				
	First Name	Middle Name	Last Name					
Debtor 2	Beverly J. Szarnio	ki						
	First Name	Middle Name	Last Name					
2.3 On	e Main Financial	Describe	the property that secures the c	laim:	\$25,975.00	\$13,205.00	\$12,770.00	
Cred	litor's Name	2013 C	hrysler 300 M 50000 mile	s				
			condition					
243	O Arlington Ridge S 3 ron, OH 44312	As of the apply.	e date you file, the claim is: Chec	k all that				
Num	ber, Street, City, State & Zip C							
Who owe	es the debt? Check one.	☐ Dispu Nature o	ited of lien. Check all that apply.					
☐ Debtor	1 only	☐ An ag	reement you made (such as morto	gage or se	ecured			
Debtor	2 only	car le	oan)					
☐ Debtor	1 and Debtor 2 only	☐ Statu	tory lien (such as tax lien, mechan	ic's lien)				
☐ At leas	at one of the debtors and a	nother \square Judgr	ment lien from a lawsuit	,				
	if this claim relates to a nunity debt	☐ Other	(including a right to offset)					
Date debt	was incurred	<u> </u>	ast 4 digits of account number	3881				
				·				
Add the	dollar value of your enti	ries in Column A o	n this page. Write that number h	nere:	\$201,220.0	0		
	the last page of your for	rm, add the dollar	value totals from all pages.		\$201,220.0	0		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

							9/05/18 4:35PM
Fill in th	is information to identi	fy your case:					
Debtor 1	Francis A.	Szarnicki					
Deptor	First Name		Middle Name	Last Name			
Debtor 2	Beverly J.	Szarnicki					
(Spouse if,		0_0	Middle Name	Last Name			
United S	tates Bankruptcy Court fo	or the: NOR	THERN DISTRICT	OF OHIO			
Case nui	mber						N. 1 27 4 2 2
(if known)						_	Check if this is an
							mended filing
Officia	I Form 106E/F						
	lule E/F: Credito	ors Who F	lave Unsecu	red Claims			12/15
					Part 2 for aradita	ro with NONDDIODITY old	ms. List the other party to
Schedule Schedule left. Attach	tory contracts or unexpire G: Executory Contracts an D: Creditors Who Have Cla the Continuation Page to case number (if known).	d Unexpired Leadins Secured by	ases (Official Form 10 Property. If more spa	06G). Do not include ace is needed, copy t	any creditors with the Part you need	th partially secured claims d, fill it out, number the en	that are listed in tries in the boxes on the
Part 1:	List All of Your PRIO	RITY Unsecure	ed Claims				
1. Do ar	ny creditors have priority ι	ınsecured claim	s against you?				
■ No	o. Go to Part 2.						
□Y€	es.						
Part 2:	List All of Your NONF	PRIORITY Uns	ecured Claims				
3. Do ar	- ny creditors have nonprior	ity unsecured c	laims against you?				
_	•	•		urt with your other cohe	dulos		
LI INC	o. You have nothing to repor	t in this part. Sub	ornit this form to the cot	irt with your other sche	edules.		
■ Ye	es.						
unsec	II of your nonpriority unsecured claim, list the creditor some creditor holds a particular.	separately for each	ch claim. For each clair	n listed, identify what t	ype of claim it is.	Do not list claims already inc	cluded in Part 1. If more
							Total claim
4.1	Capital One Bank US	ΔΝΔ	l aet 4 dinite	of account number	7348		\$249.00
	Nonpriority Creditor's Name	ANA		or account number	7370	_	Ψ243.00
	ATTN: General Corre	spondence	When was th	e debt incurred?			_
	PO Box 30285						
	Salt Lake City, UT 84 Jumber Street City State Zip			a vav tila tha alaim i	. Ob l II 4b - 4	h.	
	Number Street City State Zip Vho incurred the debt? Ch		As of the dat	e you file, the claim i	s: Check all that a	арріу	
_	Debtor 1 only	ieck one.	_				
	•		☐ Contingen				
	Debtor 2 only		☐ Unliquidat	ed			
[Debtor 1 and Debtor 2 or	nly	☐ Disputed				
[At least one of the debtor	s and another	_	PRIORITY unsecured	d claim:		
[☐ Check if this claim is fo	r a community	☐ Student lo	ans			
	lebt				ration agreement	or divorce that you did not	
	s the claim subject to offs	et?	report as prio	•			
	No			ension or profit-sharin		r similar debts	
[☐ Yes		Other. Spe	ecify Credit card			_
						·	

Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if know) 4.2 6001 \$2,136.00 **Chase Cardmember Service** Last 4 digits of account number Nonpriority Creditor's Name **Bank One** When was the debt incurred? PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes 4.3 Chase/Bank One Last 4 digits of account number 1875 \$537.00 Nonpriority Creditor's Name When was the debt incurred? PO Box 15298 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card Other. Specify 4.4 Chase/Bank One Last 4 digits of account number 0075 \$2,995.00 Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Other. Specify Credit ☐ Yes

Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if know) 4.5 \$1,197.00 **Comenity Bank** Last 4 digits of account number 0352 Nonpriority Creditor's Name One Righter Pkwy Suite 100 When was the debt incurred? Wilmington, DE 19803 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes 4.6 **Discover** Last 4 digits of account number 0251 \$10,222.00 Nonpriority Creditor's Name PO Box 742655 When was the debt incurred? Cincinnati, OH 45274-2655 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes 4.7 **Global Connections** Last 4 digits of account number \$1,121.00 Nonpriority Creditor's Name 5320 College Blvd When was the debt incurred? Leawood, KS 66211-1621 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Line of credit ☐ Yes

Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if know) 4.8 **Kohl's Most Valued Customer** \$300.00 Last 4 digits of account number 6744 Nonpriority Creditor's Name PO Box 2983 When was the debt incurred? Milwaukee, WI 53201-2983 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes **Kohl's Most Valued Customer** Last 4 digits of account number 6063 4.9 \$634.00 Nonpriority Creditor's Name PO Box 2983 When was the debt incurred? Milwaukee, WI 53201-2983 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit card ☐ Yes 4.1 One Main Financial 8908 \$23,479.00 Last 4 digits of account number 0 Nonpriority Creditor's Name When was the debt incurred? PO Box 1010 Evansville, IN 47706-1010 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Signature loan ☐ Yes

Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if know) 4.1 **Portfolio Recovery Associates** \$402.00 Last 4 digits of account number Nonpriority Creditor's Name **Riverside Commerce Center** When was the debt incurred? 120 Corp Blvd Ste 100 Norfolk, VA 23502-4962 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Regional Acceptance Recovery** \$21,950.00 Last 4 digits of account number Nonpriority Creditor's Name 1424 E Fire Tower Rd When was the debt incurred? Greenville, NC 27858-4105 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 Robert J. Szarnicki MD \$5,000.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 125 30th St. When was the debt incurred? San Francisco, CA 94121 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ■ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No Signature loan from brother; nothing repaid ■ Other. Specify to date ☐ Yes

	or 1 Francis A. Szarnicki Beverly J. Szarnicki	Case number (if know)	
4.1 4	Synchrony Bank	Last 4 digits of account number 5014	\$1,069.00
	Nonpriority Creditor's Name PO Box 965036	When was the debt incurred?	
	Orlando, FL 32896-5036 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Care credit / charge account	
4.1 5	Synchrony Bank	Last 4 digits of account number 2048	\$181.00
	Nonpriority Creditor's Name PO Box 965036 Orlando, FL 32896-5036	When was the debt incurred?	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit - JCPenney	
4.1 6	Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$122.00
	PO Box 965036 Orlando, FL 32896-5036	When was the debt incurred?	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit / JCPenney	

9/05/18 4:35PM Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if know) 4.1 3378 Synchrony Bank \$2,204.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 965036 When was the debt incurred? Orlando, FL 32896-5036 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit / care credit ☐ Yes 4.1 The Home Depot/DBNA \$259.00 2651 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? PO Box 6497 Sioux Falls, SD 57117-6497 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Contingent ■ Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Credit card Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

					Total Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
					Total Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		•	0.00
		you did not report as priority claims	6g.	\$	0.00

Debtor 1 Francis A. Szarnicki
Debtor 2 Beverly J. Szarnicki

th. Debts to pension or profit-sharing plans, and other similar debts

 Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

Case number (if know)

6i. \$ 0.00 6i. \$ 74,057.00

6j. **74,057.00**

Fill in this inform	mation to identify your				
Debtor 1	Francis A. Szarni	cki			
	First Name	Middle Name	Last Name		
Debtor 2	Beverly J. Szarnio	cki			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO					
Case number					
(if known)					☐ Check if this is an
					amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have the street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Oldio	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4			Oldio		
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	City		Oldio	211 0000	
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>

					9/05/18 4:35PM
Fill in this	s information to identify your	case:			
Debtor 1	Francis A. Szarn	icki			
Dobtor 1	First Name	Middle Name	Last Name		
Debtor 2	Beverly J. Szarn	icki			
(Spouse if, fil	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO		
•					
Case num (if known)	nber				☐ Check if this is an
,					amended filing
					ű
Officia	l Form 106H				
Sched	dule H: Your Cod	lebtors			12/15
our name	e and case number (if known you have any codebtors? (If). Answer every question		. •	o of any Additional Pages, write
■ No	`	, ,	·		
■ No					
ш те	5				
	thin the last 8 years, have you				y states and territories include
Arizoi	na, California, Idaho, Louisiana	i, Nevada, New Mexico, Pu	eno Rico, Texas, washi	ington, and wisconsin.)	
■ No	. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Name			_	
	Namo			☐ Schedule E/F, I☐ Schedule G, lin	
				_ Schedule G, lin	e
	Number Street City	State	ZIP Code		
	Oity	Giaio	Zii Gode		
3.2				Польти	
3.2	Name			_ ☐ Schedule D, lin☐ Schedule E/F, I	
				☐ Schedule E/F, I	
	Number Street			_	
	City	State	ZIP Code		

12/15

Fill in this informat	tion to identify your case:	
Debtor 1	Francis A. Szarnicki	
Debtor 2 (Spouse, if filing)	Beverly J. Szarnicki	
United States Ban	kruptcy Court for the: NORTHERN DISTRICT OF OHIO	
Case number (If known)		Check if this is: An amended filing A supplement showing postpetition chapter
Official Fo	rm 106l	13 income as of the following date: MM / DD/ YYYY

Schedule I: Your Income Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for

supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Empleyment status	■ Employed	■ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed
	employers.	Occupation		
	Include part-time, seasonal, or self-employed work.	Employer's name	Acme Fresh Market	
	Occupation may include student or homemaker, if it applies.	Employer's address	2700 Gilchrist Rd Akron, OH 44305	
		How long employed to	here?	
	Circa Dataila Abaut Man	- 4 la la . Lua a a una a		

Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

- Estimate and list monthly overtime pay. 3.
- Calculate gross Income. Add line 2 + line 3.

		For Debtor 1		Debtor 2 or -filing spouse
2.	\$	899.76	\$	0.00
3.	+\$	0.00	+\$	0.00
4.	\$	899.76	\$	0.00

Debtor 1 Prancis A. Szarnicki
Beverly J. Szarnicki

Case number (if known)

				For	Debtor 1		r Debtor 2 or n-filing spouse	
	Сору	line 4 here	4.	\$	899.76	\$_	0.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	244.41	\$	0.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	0.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	34.67	\$	0.00	
	5h.	Other deductions. Specify:	5h.+	\$	0.00	- \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	279.08	\$_	0.00	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	620.68	\$_	0.00	
8.	8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$_ \$	0.00	\$_ \$	0.00	
	8b. 8c.	Interest and dividends Family support payments that you, a non-filing spouse, or a dependent	8b.	Ф_	0.00	Ф_	0.00	
	8d. 8e.	regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	\$_ \$_ \$_	0.00 0.00 356.00	\$_ \$_ \$	0.00 0.00 108.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$	0.00	\$	0.00	
	8g.	Pension or retirement income	_ 8g.	\$	1,898.24	\$	609.86	
	8h.	Other monthly income. Specify:	8h.+	\$	0.00	- \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,254.24	\$_	717.86	
10.	Calcı	ulate monthly income. Add line 7 + line 9.	10. \$		2,874.92 + \$		717.86 = \$ 3	,592.78
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					-	,0020
11.	Includ other	e all other regular contributions to the expenses that you list in Schedule of de contributions from an unmarried partner, members of your household, your of friends or relatives. To include any amounts already included in lines 2-10 or amounts that are not a sify:	depen					0.00
12.		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 3	,592.78
10	Do ··						Combined monthly in	
13.	■	ou expect an increase or decrease within the year after you file this form? No.	·					
		Yes. Explain:						

Fill	in this informa	tion to identify yo	our case:			Ī		
Deb	tor 1	Francis A. S	zarnicki			Che	eck if this is:	
Dob	tor 2	Davierby I Co					An amended filing	
	ouse, if filing)	Beverly J. Sz	zarnicki					wing postpetition chapter the following date:
Unit	ed States Bankr	uptcy Court for the	: NORTH	ERN DISTRICT OF OHIO			MM / DD / YYYY	
Cas	e number							
(If kr	nown)							
Of	fficial Fo	rm 106J						
		J: Your l	Expen	ses				12/1
Be a	as complete a	and accurate as	possible.	If two married people ar				
Par		ibe Your House	hold					
1.	Is this a joir ☐ No. Go to							
	_	s Debtor 2 live i	in a separa	ate household?				
	■ N							
		-	st file Officia	al Form 106J-2, <i>Expen</i> ses	for Separate House	ehold of De	btor 2.	
2.	Do you have	e dependents?	■ No					
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	names.						☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.		oenses include f people other tl	han	No				
		d your depende		Yes				
		ate Your Ongoi			i			
exp				uptcy filing date unless y y is filed. If this is a supp				of the form and fill in the
				government assistance i				
	value of sucl ficial Form 10		d have inc	luded it on Schedule I: Y	our Income		Your exp	enses
4.				ses for your residence. I	nclude first mortgag	je 4.	¢	0.00
	, ,	nd any rent for the	e ground o	r iot.		٦.	<u> </u>	3.00
	If not includ	led in line 4:						
		estate taxes		- !		4a.	·	0.00
		rty, homeowner's maintenance, re		s insurance pkeep expenses		4b. 4c.	:	0.00 100.00
		owner's associat	•			4d.	\$	0.00
5.	Additional r	mortgage payme	ents for yo	ur residence, such as ho	me equity loans	5.	\$	0.00

	otor 1 otor 2	Francis A. Szarnicki Beverly J. Szarnicki	Case nu	Case number (if known)			
6.	Utiliti	ies:					
	6a.	Electricity, heat, natural gas	6	a.	\$	150.00	
	6b.	Water, sewer, garbage collection	6	b.	\$	100.00	
	6c.	Telephone, cell phone, Internet, satellite, and cable services	6	c.	\$	150.00	
	6d.	Other. Specify:	6	d.	\$	0.00	
7.	Food	and housekeeping supplies		7.	\$	850.00	
8.		Icare and children's education costs		8.	\$	0.00	
9.		ning, laundry, and dry cleaning			\$	100.00	
-		onal care products and services		0.	·	100.00	
		cal and dental expenses		1.	·	200.00	
		sportation. Include gas, maintenance, bus or train fare.		•	·	200.00	
12.		ot include car payments.	1:	2.	\$	550.00	
13.		rtainment, clubs, recreation, newspapers, magazines, and books	1	3.	\$	100.00	
		itable contributions and religious donations	1-	4.	\$	0.00	
	Insur	•			•	<u></u>	
		of include insurance deducted from your pay or included in lines 4 or 20.					
		Life insurance	15	a.	\$	134.65	
	15b.	Health insurance	15	b.	\$	407.85	
	15c.	Vehicle insurance	15	c.	\$	140.64	
	15d.	Other insurance. Specify:	15		·	0.00	
16		s. Do not include taxes deducted from your pay or included in lines 4 or 20.			<u> </u>	0.00	
	Spec		1	6.	\$	0.00	
17.		Ilment or lease payments:			•		
		Car payments for Vehicle 1	17		·	236.00	
		Car payments for Vehicle 2	17			685.00	
		Other. Specify:		C.		0.00	
		Other. Specify:	17	d.	\$	0.00	
18.		payments of alimony, maintenance, and support that you did not report		8.	\$	0.00	
40		cted from your pay on line 5, Schedule I, Your Income (Official Form 10)6I).	Ο.	\$		
19.	Spec	r payments you make to support others who do not live with you.	1	9.	Φ	0.00	
20		r real property expenses not included in lines 4 or 5 of this form or on 5			ur Income		
20.		Mortgages on other property	20:			0.00	
		Real estate taxes	20		·	0.00	
		Property, homeowner's, or renter's insurance	20			0.00	
		Maintenance, repair, and upkeep expenses	20		*	0.00	
					·		
04		Homeowner's association or condominium dues	20			0.00	
21.	Otne	r: Specify:	2	٦. ا	+\$	0.00	
22.	Calcu	ulate your monthly expenses					
	22a.	Add lines 4 through 21.			\$	4,004.14	
		Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106,	J-2		\$		
		Add line 22a and 22b. The result is your monthly expenses.			\$	4,004.14	
	220.7	ndu iine 22a and 22b. The result is your monthly expenses.			Ψ	4,004.14	
23.	Calcu	ulate your monthly net income.		•			
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23	a.	\$	3,592.78	
	23b.	Copy your monthly expenses from line 22c above.	23	b.	-\$	4,004.14	
	23c.	Subtract your monthly expenses from your monthly income.	00		œ.	411.26	
		The result is your monthly net income.	23	с.	\$	-411.36	
24.	For ex modifi	ou expect an increase or decrease in your expenses within the year after cample, do you expect to finish paying for your car loan within the year or do you expect cation to the terms of your mortgage?				ise or decrease because of a	
	■ No						
	1176	es. Explain here:					

Fill in this infor	mation to identify your case:		
Debtor 1	• • • • • • • • • • • • • • • • • • • •		
Debior	Francis A. Szarnicki First Name Midd	dle Name Last Name	
Debtor 2	Beverly J. Szarnicki		
(Spouse if, filing)		dle Name Last Name	
United States Ba	ankruptcy Court for the: NORTH	ERN DISTRICT OF OHIO	
Case number			
(if known)			Check if this is an amended filing
If two married p You must file th obtaining mone	eople are filing together, both are	e equally responsible for supplying correct information. ptcy schedules or amended schedules. Making a false st ion with a bankruptcy case can result in fines up to \$250 3571.	
Sig	n Below		
Did you pa	ay or agree to pay someone who i	is NOT an attorney to help you fill out bankruptcy forms?	,
■ No			
☐ Yes.	Name of person		ankruptcy Petition Preparer's Notice, ion, and Signature (Official Form 119)
	alty of perjury, I declare that I have e true and correct.	e read the summary and schedules filed with this declara	ation and
X /s/ Fra	ncis A. Szarnicki	X /s/ Beverly J. Szarnicki	
	s A. Szarnicki	Beverly J. Szarnicki	
	ire of Debtor 1	Signature of Debtor 2	

	l in this infor	mation to identify you	r caso:						
	btor 1	Francis A. Szarr							
	DIOI I	First Name	Middle Name	Last Name					
1 -	btor 2	Beverly J. Szarn							
(Sp	ouse if, filing)	First Name	Middle Name	Last Name					
Un	ited States Ba	nkruptcy Court for the:	NORTHERN DISTRICT (OF OHIO					
1	se number _				_	Check if this is an mended filing			
St	as complete	of Financial		are filing together, both are	equally responsible for sup				
		nore space is needed, n). Answer every que		this form. On the top of an	y additional pages, write you	ir name and case			
Pa	rt 1: Give I	Details About Your Ma	nrital Status and Where You	Lived Before					
1.	What is you	r current marital statu	ıs?						
	■ Married □ Not ma								
2.	During the I	the last 3 years, have you lived anywhere other than where you live now?							
	■ No □ Yes. Lis	st all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	ı.				
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	ldress:	Dates Debtor 2 lived there			
3. stat					ity property state or territory ico, Texas, Washington and W				
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).					
Pa	rt 2 Expla	in the Sources of You	r Income						
4.	Fill in the total	al amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part		ndar years?			
	□ No								
	Yes. Fil	I in the details.							
			Debtor 1		Debtor 2				
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)			
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,000.00	☐ Wages, commissions, bonuses, tips	\$0.00			
			☐ Operating a business		☐ Operating a business				

Case number (if known)	Case	number	(if known)
------------------------	------	--------	------------

	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$9,500.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	
For the calendar year before that: (January 1 to December 31, 2016)	■ Wages, commissions, bonuses, tips	\$8,000.00	☐ Wages, commissions, bonuses, tips	\$0.00
	☐ Operating a business		☐ Operating a business	

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

☐ No

Yes. Fill in the details.

	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Pension, Soc. Sec., and Disability	\$14,000.00	Pension, Soc. Sec., and Disability	\$8,400.00
For last calendar year: (January 1 to December 31, 2017)	Pension, Soc. Sec., and Disability	\$27,072.00	Pension, Soc. Sec., and Disability	\$8,400.00
For the calendar year before that: (January 1 to December 31, 2016)	Pension, Soc. Sec., and Disability	\$26,000.00	Pension, Soc. Sec., and Disability	\$8,400.00

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are either	Debtor 1	's or	Debtor	2's c	lebts	primari	ly cons	sumer d	lebts
----	------------	----------	-------	--------	-------	-------	---------	---------	---------	-------

□ No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	btor 1 Francis A. Szarnicki btor 2 Beverly J. Szarnicki		Cas	e number (if known)		
	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pay	ment for
7.	Within 1 year before you filed for bankruptu Insiders include your relatives; any general pa of which you are an officer, director, person in a business you operate as a sole proprietor. 1 alimony.	artners; relatives of any gen- control, or owner of 20% of	eral partners; partner r more of their voting	erships of which yo g securities; and ar	u are a general ny managing ag	partner; corporations ent, including one for
	NoYes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for t	his payment
З.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cos No Yes. List all payments to an insider		ments or transfer a	ny property on a	ccount of a del	ot that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for the Include credit	
Dai	rt 4: Identify Legal Actions, Repossession	ns and Foreclosures	•			
	List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details.					·
	Case title Case number	Nature of the case	Court or agency		Status of the	case
10.	Within 1 year before you filed for bankrupte Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below.		rty repossessed, f	oreclosed, garnis	hed, attached,	seized, or levied?
	Creditor Name and Address	Describe the Property Explain what happened		Date		Value of the property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec No Yes. Fill in the details.		uding a bank or fir	nancial institution	, set off any ar	nounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date :	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or a		rty in the possessi	on of an assigne	e for the benef	it of creditors, a
	☐ Yes					

	btor 2 Beverly J. Szarnicki			Case number	(if known)	
Dar	t 5: List Certain Gifts and Contributio	ne				
			did since any sifts with a total	1	¢c00	
13.	Within 2 years before you filed for bank ■ No	ruptcy,	did you give any gifts with a total va	liue of more ti	nan \$600 per person	f
	☐ Yes. Fill in the details for each gift.					
	Gifts with a total value of more than \$6 per person	00	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:	d				
14.	Within 2 years before you filed for bank	ruptcy,	did you give any gifts or contributio	ns with a tota	I value of more than	\$600 to any charity?
	No To the state of					
	Yes. Fill in the details for each gift or				Detec yeu	Value
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses					
15.	Within 1 year before you filed for bankri or gambling? No	uptcy o	r since you filed for bankruptcy, did	you lose anyt	hing because of the	ft, fire, other disaster,
	Yes. Fill in the details.	Doco	riba any inguranaa aayaraga far tha l	loss	Data of your	Value of property
	Describe the property you lost and how the loss occurred		ribe any insurance coverage for the lesse the lesse that the lesse		Date of your loss	Value of property lost
			ance claims on line 33 of <i>Schedule A/B</i> .			
Par	t 7: List Certain Payments or Transfer	rs				
16.	Within 1 year before you filed for bankruconsulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	prepar	ing a bankruptcy petition?			rty to anyone you
	No					
	Yes. Fill in the details.		December (1997)	4	D-1	A
	Person Who Was Paid Address Email or website address	V	Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
	Person Who Made the Payment, if Not	You				
17.	Within 1 year before you filed for bankri promised to help you deal with your cree Do not include any payment or transfer that No	editors	or to make payments to your credito		or transfer any prope	rty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred	perty	Date payment or transfer was made	Amount of payment
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have all No	ur busi rs made	ness or financial affairs? as security (such as the granting of a s		•	
	Yes. Fill in the details.		5			
	Person Who Received Transfer Address		Description and value of property transferred		any property or received or debts change	Date transfer was made
	Person's relationship to you					

Debtor 1 Francis A. Szarnicki Debtor 2 Beverly J. Szarnicki Case number (if known) 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a **beneficiary?** (These are often called asset-protection devices.) Nο ☐ Yes. Fill in the details. Name of trust Description and value of the property transferred Date Transfer was made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities,

cash, or other valuables?

No

Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Who else had access to it? Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

No

☐ Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code) Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Describe the contents

Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

No

☐ Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP

Describe the property

Value

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Case number (if known)

24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
25.	5. Have you notified any governmental unit of any release of hazardous material?						
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice		
26.	Hav	e you been a party in any judicial or adm	ninistrative proceeding under any envi	ronmental law? Include settlements a	and orders.		
		No Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case		
Pai	t 11:	Give Details About Your Business or 0	Connections to Any Business				
27.	With	nin 4 years before you filed for bankrupte	cy, did you own a business or have an	y of the following connections to any	/ business?		
		☐ A sole proprietor or self-employed in	n a trade, profession, or other activity,	either full-time or part-time			
		☐ A member of a limited liability compa	any (LLC) or limited liability partnershi	p (LLP)			
		☐ A partner in a partnership					
		☐ An officer, director, or managing exe	ecutive of a corporation				
		☐ An owner of at least 5% of the voting	g or equity securities of a corporation				
		No. None of the above applies. Go to P	art 12.				
		Yes. Check all that apply above and fill	in the details below for each business				
		siness Name dress	Describe the nature of the business	Employer Identification numbe Do not include Social Security			
		nber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Dates business existed			
28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all finstitutions, creditors, or other parties.					ude all financial		
		No Yes. Fill in the details below.					
		me dress mber, Street, City, State and ZIP Code)	Date Issued				

Debtor 1 Francis A. Szarnicki	
Debtor 2 Beverly J. Szarnicki	Case number (if known)
Part 12: Sign Below	
are true and correct. I understand that making	Financial Affairs and any attachments, and I declare under penalty of perjury that the answers a false statement, concealing property, or obtaining money or property by fraud in connection to \$250,000, or imprisonment for up to 20 years, or both.
/s/ Francis A. Szarnicki	/s/ Beverly J. Szarnicki
Francis A. Szarnicki	Beverly J. Szarnicki
Signature of Debtor 1	Signature of Debtor 2
DateJuly 23, 2018	DateJuly 23, 2018
Did you attach additional pages to Your States	ment of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay someone who is r ■ No	not an attorney to help you fill out bankruptcy forms?
☐ Ves Name of Person Attach the Rank	cruntcy Petition Preparer's Notice Declaration, and Signature (Official Form 119)

Fill in this infor	mation to identify your	case:		
Debtor 1	Francis A. Szarni	cki		
	First Name	Middle Name	Last Name	
Debtor 2	Beverly J. Szarni	cki		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF OHIO	
Case number				☐ Check if this is an
(ii kilowii)				amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

	Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
	Creditor's	☐ Surrender the property.	□ No
	name:	☐ Retain the property and redeem it.	
	Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
	property	☐ Retain the property and [explain]:	
	securing debt:		
	· ·		
_	Creditor's	☐ Surrender the property.	□ No
	name:	Retain the property and redeem it.	
		☐ Retain the property and enter into a	☐ Yes
	Description of	Reaffirmation Agreement.	
	property	☐ Retain the property and [explain]:	
	securing debt:	,	
	Creditor's	☐ Surrender the property.	□ No
	name:	☐ Retain the property and redeem it.	
	Description of	Retain the property and enter into a Reaffirmation Agreement.	Yes
	property	☐ Retain the property and [explain]:	
	securing debt:	,	
	Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

	btor 1 Francis A. Szarnicki btor 2 Beverly J. Szarnicki	Case number (if known)	
ı	name:	☐ Retain the property and redeem it.	☐ Yes
ı	Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	
ı	property	☐ Retain the property and [explain]:	
;	securing debt:		_
	rt 2: List Your Unexpired Personal Property Lease		
in ti	he information below. Do not list real estate leases.	ted in Schedule G: Executory Contracts and Unexpired Unexpired leases are leases that are still in effect; the if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
De	scribe your unexpired personal property leases		Will the lease be assumed?
	ssor's name:		□ No
	scription of leased operty:		☐ Yes
	ssor's name:		□ No
	scription of leased operty:		☐ Yes
	ssor's name:		□ No
	scription of leased operty:		☐ Yes
	ssor's name:		□ No
_	scription of leased operty:		☐ Yes
	ssor's name:		□ No
_	scription of leased operty:		☐ Yes
	ssor's name:		□ No
	scription of leased operty:		☐ Yes
	ssor's name:		□ No
	scription of leased operty:		☐ Yes
Pa	rt 3: Sign Below		
	der penalty of perjury, I declare that I have indicated perty that is subject to an unexpired lease.	my intention about any property of my estate that sec	cures a debt and any personal
X	/s/ Francis A. Szarnicki	χ /s/ Beverly J. Szarnicki	
	Francis A. Szarnicki Signature of Debtor 1	Beverly J. Szarnicki Signature of Debtor 2	
	Date July 23, 2018	Date July 23. 2018	

Fill in this information to identify your case:				
Debtor 1	Francis A. Szarnicki			
Debtor 2 (Spouse, if filing)	Beverly J. Szarnicki			
United States B	Sankruptcy Court for the:	Northern District of Ohio		
Case number (if known)				

Check one box only as directed in this form and in Form 122A-1Supp:

- 1. There is no presumption of abuse
- ☐ 2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).
- ☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.

Column B

☐ Check if this is an amended filing

Official Form 122A - 1

Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 122A-1Supp) with this form.

Part 1: Calculate Your Current Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
 - ☐ Married and your spouse is NOT filing with you. You and your spouse are:
 - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
 - □ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).

Column A

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Debto	r 1	Debtor non-fili	2 or ng spouse
e, and commissions (before al	\$	899.76	\$	0.00
le payments from a spouse if	\$	0.00	\$	0.00
		0.00	\$	0.00
n, or farm				
Debtor 1				
\$ 0.00				
-\$ 0.00				
arm \$ 0.00 Copy here -	>\$	0.00	\$	0.00
			-	
Debtor 1				
\$ 0.00				
-\$ 0.00				
\$ 0.00 Copy here -	>\$	0.00	\$	0.00
	\$	0.00	\$	0.00
	le payments from a spouse if paid for household expenses rt. Include regular contributions old, your dependents, parents, spouse only if Column B is not n, or farm Debtor 1 \$ 0.00 -\$ 0.00 Copy here - Debtor 1 \$ 0.00 -\$ 0.00 -\$ 0.00 -\$ 0.00	e, and commissions (before all \$	le payments from a spouse if paid for household expenses rt. Include regular contributions old, your dependents, parents, spouse only if Column B is not Debtor 1 SOUD -SOUD -SOU	non-filling non-fi

Debtor 1 Debtor 2 Francis A. Szarnicki Beverly J. Szarnicki

Case number (if known)

					Column A Debtor 1		Column B Debtor 2 o non-filing		
8.	Unem	ployment compensation			\$	0.00	\$	0.00	
		enter the amount if you contend that the amoun cial Security Act. Instead, list it here:	t received was a ben	efit under					
	For	you \$		0.00					
	For	your spouse \$		0.00					
	benefi	on or retirement income. Do not include any an under the Social Security Act.			\$	0.00	\$	0.00	
10.	Do not receive	e from all other sources not listed above. Specinclude any benefits received under the Social Sed as a victim of a war crime, a crime against hurstic terrorism. If necessary, list other sources on a elow.	Security Act or paymonanity, or internation	ents al or	¢	0.00	¢.	0.00	
		•			\$ \$	0.00	\$ \$	0.00	
		Total amounts from separate pages, if any.			Φ	0.00	\$	0.00	
		Total amounts from separate pages, if any.		_	Ψ	<u> </u>	Ψ	<u> </u>	
11.		late your total current monthly income. Add ling olumn. Then add the total for Column A to the to		\$	899.76	+ -	0.00	= \$8	399.76
						J L		Total currer income	nt monthly
Part	2:	Determine Whether the Means Test Applies t	o You						
12.	Calcu	ate your current monthly income for the year	. Follow these steps:	1					
	12a. C	opy your total current monthly income from line	11		Сору	y line 11 l	nere=>	\$8	99.76
	N	lultiply by 12 (the number of menths in a year)						40	
		lultiply by 12 (the number of months in a year)						x 12	707.42
	12b. T	he result is your annual income for this part of th	e form				12b	o. \$10,7	97.12
13.	Calcu	ate the median family income that applies to	you. Follow these st	eps:					
	Fill in t	he state in which you live.	ОН						
	Fill in t	he number of people in your household.	2						
		he median family income for your state and size					13.	\$60,8	34.00
		I a list of applicable median income amounts, go form. This list may also be available at the bank		specified	in the separa	ate instruc	tions		
14.	How d	o the lines compare?							
	14a.	Line 12b is less than or equal to line 13. O Go to Part 3.	n the top of page 1,	check box	1, There is r	no presum	ption of abus	e.	
	14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	of page 1, check box	2, The pre	esumption of	abuse is	determined b	y Form 122A-	2.
Part	3:	Sign Below							
	В	y signing here, I declare under penalty of perjury	that the information	on this sta	atement and	in any atta	achments is tr	rue and corre	ct.
	X	/s/ Francis A. Szarnicki	Х	/s/ Beve	erly J. Szar	nicki			
		Francis A. Szarnicki		-	J. Szarnic				
	Doto	Signature of Debtor 1	Dota	Ū	e of Debtor 2				
	Date	July 23, 2018 MM / DD / YYYY	Date	July 23, MM / DD					
	If	you checked line 14a, do NOT fill out or file Forr	n 122A-2.						
		you checked line 14b, fill out Form 122A-2 and f							

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Ohio

	110	them District of Omo			
In re	Francis A. Szarnicki Beverly J. Szarnicki		Case No.		
	Develly 5. Szarilicki	Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	JCATION OF ATTO	DNEV EOD DE	DTOD(C)	
	DISCLUSURE OF COMPEN	SATION OF ATTO	KNET FUR DE	DIUK(S)	
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing the rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy	, or agreed to be paid	to me, for services rendere	ed or to
	For legal services, I have agreed to accept			0.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	0.00	
2. T	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3. Т	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4. I	I have not agreed to share the above-disclosed compe	ensation with any other person	unless they are mem	pers and associates of my l	aw firm.
ſ	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				m. A
5. 1	In return for the above-disclosed fee, I have agreed to rer	nder legal service for all aspec	ts of the bankruptcy c	ase, including:	
b c	Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, state Representation of the debtor at the meeting of creditor [Other provisions as needed] Negotiations with secured creditors to re reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ement of affairs and plan which rs and confirmation hearing, a reduce to market value; ex rns as needed; preparation	h may be required; and any adjourned hea emption planning;	rings thereof;	of
5. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any disc any other adversary proceeding.			es, relief from stay acti	ons or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	r payment to me for re	epresentation of the debtor	(s) in
Ju	ıly 23, 2018	/s/ Rebecca J. Si			
D_{ℓ}	ate	Rebecca J. Srem			
		Signature of Attorn Sremack Law Fi	ey rm LLC		
		2745 South Arlin	gton Road		
		Akron, OH 44312 (330) 644-0061	<u>?</u> Fax: (330) 644-7241		
		info@sremackla			
		Name of law firm			

United States Bankruptcy Court Northern District of Ohio

In re	Beverly J. Szarnicki		Case No.	
		Debtor(s)	Chapter	7
	VER	IFICATION OF CREDITOR	MATRIX	
Γhe ab	ove-named Debtors hereby verify	that the attached list of creditors is true and o	correct to the best	of their knowledge.
Date:	July 23, 2018	/s/ Francis A. Szarnicki		
Date:	July 23, 2018	/s/ Francis A. Szarnicki Francis A. Szarnicki		
Date:	July 23, 2018			
Date:		Francis A. Szarnicki		
		Francis A. Szarnicki Signature of Debtor		

Francis A. Szarnicki

Ally Financial PO Box 380901 Minneapolis, MN 55438-0901

Capital One Bank USA NA ATTN: General Correspondence PO Box 30285 Salt Lake City, UT 84130-0287

Chase Cardmember Service Bank One PO Box 15298 Wilmington, DE 19850

Chase/Bank One PO Box 15298 Wilmington, DE 19850

Chase/Bank One PO Box 15298 Wilmington, DE 19850

Comenity Bank
One Righter Pkwy Suite 100
Wilmington, DE 19803

Discover PO Box 742655 Cincinnati, OH 45274-2655

Global Connections 5320 College Blvd Leawood, KS 66211-1621

Kohl's Most Valued Customer PO Box 2983 Milwaukee, WI 53201-2983

Kohl's Most Valued Customer PO Box 2983 Milwaukee, WI 53201-2983

Live Well Financial 1011 Boulder Springs Dr. Suite 420 Richmond, VA 23225 One Main Financial 790 Arlington Ridge Ste 243 Akron, OH 44312

One Main Financial PO Box 1010 Evansville, IN 47706-1010

Portfolio Recovery Associates Riverside Commerce Center 120 Corp Blvd Ste 100 Norfolk, VA 23502-4962

Regional Acceptance Recovery 1424 E Fire Tower Rd Greenville, NC 27858-4105

Robert J. Szarnicki MD 125 30th St. San Francisco, CA 94121

Synchrony Bank PO Box 965036 Orlando, FL 32896-5036

The Home Depot/DBNA PO Box 6497 Sioux Falls, SD 57117-6497